

50907 U.S. PTO
08/24/00

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PTO/SB/05 (2/98) (modified)

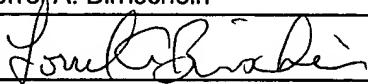
Approved for use through 9/30/2000, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**NEW UTILITY
PATENT APPLICATION
TRANSMITTAL**
(only for new nonprovisional applications under
37 CFR 1.53(b))

Attorney Docket Number	4480 US	PTO
First Named Inventor	Beerud D. Sheth	
Total Pages in this Submission	50 (does not include cited references)	U.S. 09/640,100
Express Mail Label No.	EL497214515US	jc862

APPLICATION ELEMENTS		ACCOMPANYING APPLICATION PARTS	
1. <input checked="" type="checkbox"/> Fee Transmittal Form (in duplicate) <input type="checkbox"/> Check Enclosed		6. <input checked="" type="checkbox"/> Assignment & Assignment Recordation Cover Sheet	
2. <input checked="" type="checkbox"/> Specification <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <input type="checkbox"/> Descriptive Title of the Invention <input type="checkbox"/> Cross Reference(s) to Related Case(s) <input type="checkbox"/> Statement Regarding Fed sponsored R & D <input type="checkbox"/> Background of the Invention <input type="checkbox"/> Brief Summary of the Invention <input type="checkbox"/> Brief Description of the Drawing(s) <input type="checkbox"/> Detailed Description <input type="checkbox"/> Claim or Claims <input type="checkbox"/> Abstract of the Disclosure 		7. <input type="checkbox"/> Certified Copy of Priority Document(s) <small>(if foreign priority is claimed)</small>	
3. <input checked="" type="checkbox"/> Drawings (18 sheets – informal) <small>(when necessary per 35 USC 113)</small>		8. <input checked="" type="checkbox"/> Information Disclosure Statement & PTO-1449 <input checked="" type="checkbox"/> Copies of IDS Citation(s)	
4. Oath or Declaration <ul style="list-style-type: none"> a. <input checked="" type="checkbox"/> New Declaration <input checked="" type="checkbox"/> Executed b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed)</small> <ul style="list-style-type: none"> i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 		9. <input type="checkbox"/> Preliminary Amendment	
5. <input type="checkbox"/> Incorporation by Reference <small>(useable if Box 4b is checked)</small> . The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.		10. Small Entity Statement <ul style="list-style-type: none"> <input checked="" type="checkbox"/> New Statement enclosed <input type="checkbox"/> Statement filed in prior application. Status still proper and desired 	
		11. <input checked="" type="checkbox"/> Return Postcard 12. <input type="checkbox"/> 13. <input type="checkbox"/> 14. <input type="checkbox"/> 15. <input type="checkbox"/> 16. <input type="checkbox"/>	
ADDRESS TO: Box Patent Application Commissioner for Patents Washington, D.C. 20231			
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____			
Prior application information: Examiner: _____		Group/Art Unit: _____	
18. CORRESPONDENCE ADDRESS			
NAME	Lorrel A. Birnschein Fenwick & West LLP		
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CITY	Palo Alto	STATE	CA
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Name (Print/Type)	Lorrel A. Birnschein		Registration No. (Attorney/Agent) P-46,555
Signature			Date 8/24/00

08/24/00

0002/PTO(modified) Rev. 10/95	U.S. Department of Commerce Patent and Trademark Office	Complete if Known	
FEES TRANSMITTAL		Application Number	N/A
TOTAL AMOUNT OF PAYMENT		Filing Date	Herewith
Subtotal (1) + Subtotal (2) + Subtotal (3) = (\$424.00)		First Named Inventor	Beerud D. Sheth
		Group Art Unit	N/A
		Examiner Name	N/A
		Attorney Docket Number	4480 US

METHOD OF PAYMENT		FEES CALCULATION (continued)																																																		
1. The Commissioner is hereby authorized to:		3. ADDITIONAL FEES																																																		
<input type="checkbox"/> Charge the indicated fees to the below mentioned deposit account. <input checked="" type="checkbox"/> Charge any additional fee required under 37 CFR 1.16 - 1.21 or credit any over payments to the below mentioned deposit account. ¹ <input type="checkbox"/> Charge the Issue Fee set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.311(b) to the below mentioned deposit account.		Large Entity	Small Entity	Fee Description																																																
		Fee Code/Fee	Fee Code/Fee	Fee Due																																																
		105/\$130	205/\$65	Surcharge - late filing fee or oath																																																
		127/\$50	227/\$25	Surcharge-late provisional filing fee or cover sheet																																																
		147/\$2,520	147/\$2,520	For filing a request for reexamination																																																
		115/\$110	215/\$55	Extension for response within first month [†]																																																
		116/\$380	216/\$190	Extension for response within second month [†]																																																
		117/\$870	217/\$435	Extension for response within third month [†]																																																
		118/\$1,360	218/\$680	Extension for response within fourth month [†]																																																
		128/\$1,850	228/\$925	Extension for response within fifth month [†]																																																
		119/\$300	219/\$150	Notice of Appeal																																																
		141/\$1,210	241/\$605	Petition to revive unintentionally abandoned application																																																
		142/\$1,210	242/\$605	Utility Issue Fee (Or Reissue)																																																
		143/\$430	243/\$215	Design Issue Fee																																																
		122/\$130	122/\$130	Petitions to the Commissioner																																																
		123/\$50	123/\$50	Petitions related to provisional applications																																																
		126/\$240	126/\$240	Submission of Information Disclosure Statement																																																
		581/\$40	581/\$40	Recording each patent assignment per property (times number of properties)																																																
		146/\$690	246/\$345	Filing a submission after final rejection (37 CFR 1.129(a))																																																
		149/\$690	249/\$345	For each additional invention to be examined (37 CFR 1.129(b))																																																
2. CLAIMS		Other fee (specify):																																																		
		Other fee (specify):																																																		
		SUBTOTAL (3) (\$40.00)																																																		
		<table border="1" style="width: 100%;"> <thead> <tr> <th rowspan="2">For</th> <th rowspan="2">No. of Existing Claims</th> <th colspan="2">(Col. 1)</th> <th colspan="2">(Col. 2)</th> <th colspan="2">(Col. 3)</th> <th rowspan="2">Fee</th> <th rowspan="2">Fee Due</th> </tr> <tr> <th colspan="2">minus*</th> <th colspan="2">Highest No. Previously Paid For</th> <th colspan="2">Extra**</th> </tr> </thead> <tbody> <tr> <td>TOTAL</td> <td>17</td> <td colspan="2">minus*</td> <td>20 or 20</td> <td>=</td> <td>0</td> <td>x</td> <td>9</td> <td>=</td> <td>0</td> </tr> <tr> <td>INDEP</td> <td>4</td> <td colspan="2">minus*</td> <td>3 or 1</td> <td>=</td> <td>1</td> <td>x</td> <td>39</td> <td>=</td> <td>39</td> </tr> <tr> <td colspan="10" style="text-align: center;">[] First presentation of multiple dependent claim</td> </tr> </tbody></table>			For	No. of Existing Claims	(Col. 1)		(Col. 2)		(Col. 3)		Fee	Fee Due	minus*		Highest No. Previously Paid For		Extra**		TOTAL	17	minus*		20 or 20	=	0	x	9	=	0	INDEP	4	minus*		3 or 1	=	1	x	39	=	39	[] First presentation of multiple dependent claim									
For	No. of Existing Claims	(Col. 1)		(Col. 2)			(Col. 3)		Fee	Fee Due																																										
		minus*		Highest No. Previously Paid For		Extra**																																														
TOTAL	17	minus*		20 or 20	=	0	x	9	=	0																																										
INDEP	4	minus*		3 or 1	=	1	x	39	=	39																																										
[] First presentation of multiple dependent claim																																																				
		* Subtract the greater number of Col. 2			SUBTOTAL (2) (\$39.00)																																															
		** If the difference between Col. 1 and Col. 2 is less than zero, then enter "0" in Col. 3																																																		
SUBMITTED BY					Complete (if applicable)																																															
Typed or Printed Name		Lorrel A. Birnschein			Reg. Number			P-46,555																																												
Signature				Date		8/24/00																																														

¹ Request for Extension of Time per 37 CFR 1.136 (a)(3) made hereby
Rev. 11/04/99